IN THE UNITED STATES PATENT AND TRADEMARK OFFICE **UTILITY PATENT APPLICATION TRANSMITTAL**

Attorney Docket No.: P-11089.00 Express Mail No: **EV 331791506 US**

First Named Inventor or Application Identifier: William F. Ka mmer r

Title: Treatm nt of Neurod g n rative Disease Through Intracranial Delivery of siRNA

CERTIFICATE UNDER 37 CFR SECTION 1.10: I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein

	are being deposited with the United States Postal Service, in an envelope address "EXPRESS EV 331791506 US addressed to Box Patent Application, Commissioner of Patents and Trademarks, Washington, D.C.							
		20231, on this November 25, 2003.						
		Juanita I. Traufler Printed Name Juanita Signature Printed Name Prin						
Cor P.C	mmis	pp BOX PATENT APPLICATION sioner for Patents x 1450 ria, VA 22313-1450						
Sir:								
We <u>X</u> <u>X</u>								
<u>X</u>	Dra	awings						
X		otal Sheets: 6 (_ formal; <u>X</u> informal) ombined Declaration and Power of Attorney:						
	X	Newly executed (Unsigned) Copy from prior application						
	Deletion of inventor(s) signed statement attached deleting inventor(s) named in the prior application of CFR 1.63(d)(2) and 1.33(b) Incorporation by reference The entire disclosure of the prior application, from which a copy of the oa							
		declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference herein.						
<u>X</u>	Accompanying application parts:							
	-	Notification of filing a _ Continuation _ Divisional _ Continuation-in-Part Assignment of the invention to Medtronic, Inc.						
	_	Assignment cover sheet						
	-	Information Disclosure Statement PTO Form 1449						
	_	Copies of IDS citations						
	$\bar{\mathbf{x}}$	Preliminary Amendment Sequence Listing with Disk						
	$\frac{\overline{\mathbf{X}}}{\mathbf{X}}$	Return postcard						
IF /	A CO	NTINUING APPLICATION:						
	-	Continuation _ Divisional _ Continuation-in-Part of prior application no						
	-	 Amend the specification by inserting before the first line the sentence: This application is a Continuation _ Divisional _ Continuation-in-Part of application number. 						
	_	Cancel in this application original claims of the prior application before calculating the filing fee. (At least one of the original independent claims must be retained for filing purposes.)						
	<u>x</u>	The prior application is assigned of record to Medtronic, Inc.						
	<u>X</u>	The Power of Attorney in the prior application is to: .						
_								

X This application claims the benefit of U.S. Provisional Application(s) Serial No. 60/444,614 filed February 3. 2003 and 60/429,387 filed November 26, 2002.

X Address all future correspondence to:

Kenneth J. Collier Reg. No. 34,982 Medtronic, Inc.

710 Medtronic Parkway N.E. Minneapolis, MN 55432 Telephone: (763) 505-2521

FEE CALCULATION

	No. Of Claims Filed	Claims Included in Base Fee	No. Of Extra Claims	Rate	Fee
Total Claims	84	20 =	64	x \$ 18	\$ 1,152.00
Independent Claims	7	3 =	4	x \$86	\$344.00
Multiple Dependent Claim(s)		0 =		+ \$ 290	
Basic Filing Fee			0		\$770.00
				TOTAL	\$2,266,00

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√ Charge Deposit Account No. 13-2546 the sum of \$770.0 \$1,152.00 for Total Claims fee for a total of \$2,266.00.

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A guplicate of this transmittal is enclosed.

Date

Kenneth J. Collier

Attorney Reg. No. 34,982 Medtronic, Inc.

710 Medtronic Parkway N.E. Minneapolis, MN 55432 Telephone: (763) 505-2521